## PART B - FEE(S) TRANSMITTAL

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CURRENT CORRESPONDEN	CE ADDRESS (Note: Use Block	1 for any change of address)	Note Feel	e: A certificate of mailir s) Transmittal. This cert	ng can only be used for	domestic mailings of the any other accompanying	
			pape	ers. Each additional pape its own certificate of ma	r, such as an assignment	or formal drawing, must	
	590 11/13/20			Certificat	e of Mailing or Transm	ission	
TAROLLI, SUN 1300 EAST NINT CLEVEVLAND,	IDHEIM, COVEL TH STREET, SUITE OH 44114	1700 NPE	ENTERED I her State addr trans	reby certify that this Fee es Postal Service with su essed to the Mail Stop smitted to the USPTO (5)	(s) Transmittal is being of the first ISSUE FEE address a 71) 273-2885, on the dat	deposited with the United class mail in an envelope bove, or being facsimile e indicated below.	
/22/2007 BABRAHA2 00000031 10804937			<u>→</u>	Meryl E. Greff		(Depositor's name)	
FC:2501		JAN 2 2 200	W <sub>H</sub> ) -	Mens 8.2	ALL.	(Signature)	
FC:1504	700.00 QF 300.00 QP	PART		1/1/1/07		(Date)	
APPLICATION NO.	FILING DATE	PADEMA	FIRST NAMED INVENTOR	ATTO	ORNEY DOCKET NO.	CONFIRMATION NO.	
10/804,937	03/19/2004		Bela Anand-Apte		CCF-6494NP	8141	
TITLE OF INVENTION: 1	ΓΙΜΡ3 AS VEGF INHIB	ITOR					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$700	\$300	\$0	\$1000	02/13/2007	
EXAMIN	IER	ART UNIT	CLASS-SUBCLASS				
KOSSON, RO	SANNE	1652	514-012000	•			
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> </ol>			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,				
Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  2 Covell & Tummino LI				
(A) NAME OF ASSIGN	s an assignee is identificing 37 CFR 3.11. Comple NEE Clinic Fou	ed below, no assignee tion of this form is NO undation	data will appear on the progression of the progress	atent. If an assignee is assignment. and STATE OR COUN and, Ohio	TRY)	cument has been filed for	
4a. The following fee(s) are submitted:  Issue Fee  Publication Fee (No small entity discount permitted)  Advance Order - # of Copies			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 20-0090 (enclose an extra copy of this form).				
	SMALL ENTITY status.	See 37 CFR 1.27.	☐ b. Applicant is no long	ger claiming SMALL EN	ITITY status. See 37 CFI	R 1.27(g)(2).	
NOTE: The Issue Fee and I interest as shown by the rec	cords of the United States	Patent and Trademark	office.	ne applicant; a registered	attorney or agent, or the	assignee or other party in	
Authorized Signature	Authorized Signature			Date 1/17/	07		
Typed or printed name Richard S. Wesorick			Registration No. 40,871				
This collection of informati an application. Confidentia submitting the completed a this form and/or suggestion Box 1450, Alexandria, Virg Alexandria, Virginia 22313	-1430.			etain a benefit by the put imated to take 12 minute idual case. Any commer r, U.S. Patent and Trade D THIS ADDRESS. SEN			